

GENERAL HEADQUARTERS
SUPREME COMMANDER FOR THE ALLIED POWERS
Public Health and Welfare Section

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SCHOOL LUNCH

The school lunch plays an important part in the development of children. The growing child requires not only food, but the right kind of food for its development, health and future usefulness.

The objective of the school lunch should be to provide the supplements to the staple food that will assure a well developed child. The nutrients that are most likely to be short in the child's diet are calcium, vitamins of the Vitamin B complex and good protein.

Foods that supply these nutrients are (a) fish and fish products in which the bones are eaten with the fish or cooked so that they are edible and eaten; (b) leafy vegetables; (c) seaweeds, soy beans; and (d) milk. Ground and finely sifted oyster shell ^{or} limestone is also used as a source of calcium and can be incorporated into the school lunch.

Milk is a particularly good food because it contains not only calcium but Vitamin B₂ and animal protein. Dried skimmed milk has these nutrients, just as whole milk. Cottage cheese is also a good source of these nutrients.

The leafy green vegetables and grasses supply calcium, good protein, ^{iron, Vitamin C and} carotene from which the body makes Vitamin A and Vitamin C. The leafy vegetables are particularly important because they contain many other nutrients important for health.

Seaweeds contain considerable calcium and some carotene for Vitamin A.

and community and to ^{basic} nutritional requirements for sound long-range recommendations. Means of assessing nutritional status and food intake include

(4) Casual observation of people on the street and foods available in gardens, fields, markets and stores.

(8) Analyze ^{3,3 of} food thefts. The frequency and location of food thefts may shed light on local conditions of nutrition.

(2) Checks on special groups. Special groups in a population, such as infants, children, pre-adolescents, ^{and} pregnant and nursing women, reflect the results of inadequacy sooner than others. Certain groups of individuals in communities on rations do not have the same opportunity to obtain additional food as the general population. Among these are old people, patients in hospitals, and inmates of institutions. These groups are a good source of evidence of the effects of the minimum food supply. Such evidence must be discounted in relation to the over-all situation for ^{with regard to the food they can distribute} they reflect the official attitude while the community at large is able to obtain additional food. The condition of the patients and the types of nutritional inadequacies in hospitals are an index to specific nutritional problems of the community as a whole.

(4) Nutrition Surveys. A survey is the best means of assessing the nutritional status of a population. Nutrition surveys include the determination of the physical condition of the population and the quantities and kinds of food consumed. ^{Evidence on} The ^{obtained in} nutritional status ^{of the} surveys ^{indicates} furnishes ^{that need emphasis} evidence as to the types of food required and the degree of emergency that exists in cases of general under nutrition. The kinds and amounts of food consumed supply a basis ^{for} recommendation as to the kinds and amounts of food required. Such data are the practical type of information required for ^{action by the military authorities or the civilian population} correction. ~~Nutrition surveys of various types yield information of~~

Comparison of the incidence of symptoms from one survey to another and in relation to the usual rates together with consideration of the death rates, and incidence of infectious disease in the community are important in reaching a sound conclusion.

e) ~~28~~ ²⁸ Prevention of Dietary Deficiency: Prevention consists of the maintenance of normal nutritional health in average individuals by means of a natural diet, the components of which should be varied in order to insure qualitative adequacy. MG Public Health Officers, in plans for feeding, will consider the availability and cost of foods and the dietary customs and habits of the people who are to consume them. Conclusions that dietary habits and customs exert an unfavorable influence on nutritional status should be made only after careful observation and consideration, since it has been shown that natural selection often results in adequate dietaries. Acceptable and adequate substitute foodstuffs should be available before questionable native food practices are discontinued, since as a rule food habits are deeply ingrained in the people. Not uncommonly, the deficiencies resulting from habit and custom are related to modern developments of processing and preservation. Thus the use of highly milled and polished rice has been productive of a high incidence of beri-beri in certain areas of the Orient, and in Japan has led to legislation regulating the milling of rice in order to preserve the ~~anti~~ beri-beri factors in the grain.

f) ²⁹ Protection against Dietary Deficiency: Protection against nutritional inadequacy applies to particular groups of individuals who are especially susceptible to nutritional deficiency disease. It includes infants and young children, adolescents, pregnant women, and nursing mothers, the aged, certain groups of workers exposed to occupational hazards, and persons with diseases predisposing to nutritional deficiency. Circumstances

or obtained by home production or gift ^{and} with ~~estimates~~ of caloric content. Examination of these reports in relation to nutrition surveys indicates that they are fairly good in some cities and not very reliable in others, even for rationed food because they have stated the ration allowance when the quantity was not issued. Such reports and analysis cover the following:

2. Official ration scale for individuals in various categories.
3. Quantities of rationed food actually available to individuals in various categories, including those in excess of the authorized allowance.
4. Extent to which food actually obtained was purchased or received in whole or part as a free issue. This will include food served in soup or central kitchens, canteens, etc. of Red Cross, Welfare Agencies, mines, manufacturers, etc. For relief clients, special worker groups, or the population as a whole. In the case of soup or ^{Cooked} ~~custard~~ meals, statements of quantities of constituents served per capita and frequency of serving should be given: agencies providing food in kind or ^{free} ~~fee~~ should be listed, and size and description of the population groups recorded.
5. The vitamin concentrates or preparations and mineral salts issued by private or state agencies and the categories of individuals to whom available and basis of issue.
6. Evidence with regard to state of health of the population as indicated by:

